

Form P-64A
(REV. 1999)

STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATE

DO NOT WRITE OR STAPLE IN THIS SPACE

CLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

TAX MAP KEY				CPR NO.
Z	S	PLAT	PARCEL	
				See Attached

ISLAND Oahu APT. NO.

NAME OF PARTIES TO THE DOCUMENT (Please Type or Print)
SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.

SPORTS SHINKO (WAIKIKI) CORPORATION

PURCHASER(S) / TRANSFeree(S) / GRANTEE(S), ETC.
OR HOTEL, LLC

DATE OF TRANSACTION: January, 2002

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1. Sale Price	1	5,500,000	00
EXCHANGE OF PROPERTIES:			
2a. Market value of all property(ies) exchanged	2a		
2b. Other consideration	2b		
2c. Total (Add lines 2a and 2b)	2c		
ASSIGNMENT OF LEASE:			
3a. Sale price of leasehold	3a		
3b. Value of any increase in lease rental capitalized at 6% (See Instructions)	3b		
3c. Total (Add lines 3a and 3b)	3c		
LEASE OR SUBLEASE:			
4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____ 1st period _____ yrs @ \$ _____/yr. 2nd period _____ yrs @ \$ _____/yr. 3rd period _____ yrs @ \$ _____/yr. 4th period _____ yrs @ \$ _____/yr. Total rent capitalized at 6%	4a		
4b. Sales price or premium for the lease.....	4b		
4c. Total (Add lines 4a and 4b)	4c		
TAX COMPUTATION AND BALANCE DUE:			
5. Amount from line 1, 2c, 3c, or 4c.....	5	5,500,000	00
6. Less: personal property included in amount on line 5, if applicable	6	550,000	00
7. Difference — Actual and full consideration (line 5 minus line 6)	7	4,950,000	00
8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$10).)	8	4,950	00
9a. Penalty. For late filing (See Instructions)	9a		
9b. Interest. For late payment (See Instructions)	9b		
10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b)	10	4,950	00

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here:

Please provide mailing address for assessment notice:

NAME	ADDRESS	ZIP
OR Hotel, LLC	1001 Bishop St, Ste 1570, Hon, HI	96813

Please provide real property billing address, if different from assessment address:

NAME	ADDRESS	ZIP
		232 0887

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee
Under Honolulu Ordinance No. 80-88, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.
OR HOTEL, LLC

EXHIBIT 29

By: Wayne T. Tanigawa, Its Member
DAYTIME PHONE NO.: (808) 524 1508

DAYTIME PHONE NO.: ()

FORM P-64

BREAKDOWN OF SALES PRICE PER TAX MAP KEY

TMK (1) 2/6/027/050 - \$ 613,945.88
TMK (1) 2/6/027/008 - \$3,107,425.68
TMK (1) 2/6/027/007 - \$1,228,628.44

TOTAL SALES PRICE \$4,950,000.00

232 0888

Form P-64A
REV. 1999STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATE

DO NOT WRITE OR STAPLE IN THIS SPACE

CLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

		TAX MAP KEY		CPR NO.
Z	S	PLAT	PARCEL	
See	Attached			
ISLAND	Maui			APT. NO.

NAMES OF PARTIES TO THE DOCUMENT (Please Type or Print)

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.
Sports Shinko (Pukalani) Co., Ltd.

PURCHASER(S) / TRANSFeree(S) / GRANTEE(S), ETC.

Pukalani Golf Club, LLC

DATE OF TRANSACTION:

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1

4,000,000 00

1. Sale Price.....

EXCHANGE OF PROPERTIES:

2a

2b

2c

2a. Market value of all property(ies) exchanged

2b. Other consideration

2c. Total (Add lines 2a and 2b)

ASSIGNMENT OF LEASE:

3a

3b

3c

3a. Sale price of leasehold

3b. Value of any increase in lease rental capitalized at 6% (See Instructions)

3c. Total (Add lines 3a and 3b)

LEASE OR SUBLEASE:

4a

4b

4c

4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____

1st period _____ yrs @ \$ _____ /yr. 2nd period _____ yrs @ \$ _____ /yr.

3rd period _____ yrs @ \$ _____ /yr. 4th period _____ yrs @ \$ _____ /yr.

Total rent capitalized at 6%.

4b. Sales price or premium for the lease.....

4c. Total (Add lines 4a and 4b)

4c

4,000,000 00

5

200,000 00

6

3,800,000 00

7

3,800 00

8

3,800 00

9a

9b

10

3,800 00

5. Amount from line 1, 2c, 3c, or 4c.....

6. Less: personal property included in amount on line 5, if applicable

7. Difference — Actual and full consideration (line 5 minus line 6)

8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$10))

9a. Penalty. For late filing (See Instructions).....

9b. Interest. For late payment (See Instructions)

10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b)

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here:

Please provide mailing address for assessment notice:

ADDRESS

ZIP
96813NAME
Pukalani Golf Club, LLC

1001 Bishop St, Ste 1570, Hon HI

Please provide real property billing address, if different from assessment address:

ADDRESS

ZIP

NAME

232 1142

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee
Under Honolulu Ordinance No. 80-68, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) Purchaser(s)/Transferee(s)/Grantee(s), Etc.
Pukalani Golf Club, LLCBy Wayne Tanigawa, Its Manager
(808) 324-1508

DATETIME PHONE NO.: ()

FORM P-64

BREAKDOWN OF SALES PRICE PER TAX MAP KEY

TMK (2) 2/3/055/068 - \$	1,588.22
TMK (2) 2/3/055/069 - \$	1,283.41
TMK (2) 2/3/048/125 - \$	1,353.36
TMK (2) 2/3/049/088 - \$	4,950.75
TMK (2) 2/3/057/124 - \$	124,778.25
TMK (2) 2/3/056/097 - \$	636,081.10
TMK (2) 2/3/056/098 - \$	539,240.75
TMK (2) 2/3/056/095 - \$	1,269.93
TMK (2) 2/3/056/096 - \$	1,283.41
TMK (2) 2/3/057/121 - \$	1,283.41
TMK (2) 2/3/057/138 - \$	303,202.40
TMK (2) 2/3/061/114 - \$	639,612.40
TMK (2) 2/3/009/004 - \$	1,135,157.54
TMK (2) 2/3/009/040 - \$	408,915.07

SALES PRICE	\$3,800,000.00
-------------	----------------

Form P-64A
(REV. 1999)STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATE

DO NOT WRITE OR STAPLE IN THIS SPACE

CLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

TAX MAP KEY		PARCEL	CPR NO.
Z	S		
See Attached			

ISLAND Maui APT. NO.

NAMES OF PARTIES TO THE DOCUMENT (Please Type or Print)

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.
Sports Shinko (Pukalani) Co., Ltd.PURCHASER(S) / TRANSFeree(S) / GRANTEE(S), ETC.
KG Maui Development, LLC

DATE OF TRANSACTION:

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1. Sale Price

1 500,000 00

EXCHANGE OF PROPERTIES:

2a. Market value of all property(ies) exchanged

2a

2b. Other consideration

2b

2c. Total (Add lines 2a and 2b)

2c

ASSIGNMENT OF LEASE:

3a. Sale price of leasehold

3a

3b. Value of any increase in lease rental capitalized at 6% (See Instructions)

3b

3c. Total (Add lines 3a and 3b)

3c

LEASE OR SUBLEASE:

4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____

4a

1st period ____ yrs @ \$ ____/yr. 2nd period ____ yrs @ \$ ____/yr.

4b

3rd period ____ yrs @ \$ ____/yr. 4th period ____ yrs @ \$ ____/yr.

4c

Total rent capitalized at 6%

4d. Sales price or premium for the lease..

4e. Total (Add lines 4a and 4b)

4e

TAX COMPUTATION AND BALANCE DUE:

5. Amount from line 1, 2c, 3c, or 4c

5 500,000 00

6. Less: personal property included in amount on line 5, if applicable

6

7. Difference — Actual and full consideration (line 5 minus line 6)

7

8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$10).)

8

500 00

9a. Penalty. For late filing (See Instructions)

9a

9b. Interest. For late payment (See Instructions)

9b

10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b)

10

500 00

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here:

Please provide mailing address for assessment notice:

NAME

ADDRESS

ZIP

KG Maui Development, LLC

1001 Bishop St., Ste 1570, Hon HI

96813

Please provide real property billing address, if different from assessment address:

NAME

ADDRESS

ZIP

232 1145

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee
Under Honolulu Ordinance No. 90-88, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.

KG Maui Development, LLC

By Wayne Tanigawa, Its Manager

DAYTIME PHONE NO.: (808) 524 - 1508

DAYTIME PHONE NO.: () - - -

FORM P-64A

BREAKDOWN OF SALES PRICE PER TAX MAP KEY**TMK (2) 2/3/008/005 - \$ 24,936.30****TMK (2) 2/3/008/036 - \$125,381.24****TMK (2) 2/3/009/039 - \$322,977.60****TMK (2) 2/3/047/126 - \$ 26,704.86****SALES PRICE \$500,000.00**

232 1146

Form P-64A
REV. 1999)STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATE

DO NOT WRITE OR STAPLE IN THIS SPACE

CLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

TAX MAP KEY				
Z	S	PLAT	PARCEL	CPR NO.
2	6	027	028	
ISLAND <u>Oahu</u>				APT. NO. _____

NAMES OF PARTIES TO THE DOCUMENT (Please Type or Print)

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.

SPORTS SHINKO (WAIKIKI) CORPORATION

PURCHASER(S) / TRANSFeree(S) / GRANTEE(S), ETC.

QK HOTEL, LLC

DATE OF TRANSACTION:

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1. Sale Price 1 3,500,000 00

EXCHANGE OF PROPERTIES:

2a. Market value of all property(ies) exchanged 2a
2b. Other consideration 2b
2c. Total (Add lines 2a and 2b) 2c

ASSIGNMENT OF LEASE:

3a. Sale price of leasehold 3a
3b. Value of any increase in lease rental capitalized at 6% (See Instructions) 3b
3c. Total (Add lines 3a and 3b) 3c

LEASE OR SUBLEASE:

4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____
1st period _____ yrs @ \$ _____ /yr. 2nd period _____ yrs @ \$ _____ /yr.
3rd period _____ yrs @ \$ _____ /yr. 4th period _____ yrs @ \$ _____ /yr.
Total rent capitalized at 6% 4a
4b. Sales price or premium for the lease 4b 4c. Total (Add lines 4a and 4b) 4c

TAX COMPUTATION AND BALANCE DUE:

5. Amount from line 1, 2c, 3c, or 4c 5 3,500,000 00
6. Less: personal property included in amount on line 5, if applicable 6 350,000 00
7. Difference — Actual and full consideration (line 5 minus line 6) 7 3,150,000 00

8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$10).) 8 3,150 00
9a. Penalty. For late filing (See Instructions) 9a
9b. Interest. For late payment (See Instructions) 9b
10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b) 10 3,150 00

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here: _____

Please provide mailing address for assessment notice:

NAME OK Hotel, LLC ADDRESS 1001 Bishop St, Ste 1570, Hon HI ZIP 96813

Please provide real property billing address, if different from assessment address:

NAME ADDRESS ZIP 232 1256

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee
Under Honolulu Ordinance No. 90-68, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

(We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid in the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.

QK HOTEL, LLC [Signature]

By: Wayne T. Tanigawa, Its Member

DAYTIME PHONE NO.: (808) 524-1508

Form P-64A
(REV. 1999)STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATE

DO NOT WRITE OR STAPLE IN THIS SPACE

CLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

TAX MAP KEY				
Z	S	PLAT	PARCEL	CPR NO.
See Attached				
ISLAND <u>Kauai</u>		APT. NO. _____		

NAMES OF PARTIES TO THE DOCUMENT (Please Type or Print)

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.
Sports Shinko (Kauai) Co., Ltd.PURCHASER(S) / TRANSFEREE(S) / GRANTEE(S), ETC.
Kiahuna Golf Club, LLC

DATE OF TRANSACTION:

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1. Sale Price	1	2,500,000 00
EXCHANGE OF PROPERTIES:		
2a. Market value of all property(ies) exchanged	2a	
2b. Other consideration	2b	
2c. Total (Add lines 2a and 2b)	2c	
ASSIGNMENT OF LEASE:		
3a. Sale price of leasehold	3a	
3b. Value of any increase in lease rental capitalized at 6% (See Instructions)	3b	
3c. Total (Add lines 3a and 3b)	3c	
LEASE OR SUBLEASE:		
4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____		
1st period _____ yrs @ \$ _____ /yr. 2nd period _____ yrs @ \$ _____ /yr.		
3rd period _____ yrs @ \$ _____ /yr. 4th period _____ yrs @ \$ _____ /yr.		
Total rent capitalized at 6%	4a	
4b. Sales price or premium for the lease	4b	
4c. Total (Add lines 4a and 4b)	4c	

TAX COMPUTATION AND BALANCE DUE:

5. Amount from line 1, 2c, 3c, or 4c	5	2,500,000 00
6. Less: personal property included in amount on line 5, if applicable	6	200,000 00
7. Difference — Actual and full consideration (line 5 minus line 6)	7	2,300,000 00
8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$.10))	8	2,300 00
9a. Penalty. For late filing (See Instructions)	9a	
9b. Interest. For late payment (See Instructions)	9b	
10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b)	10	2,300 00

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here:

Please provide mailing address for assessment notice:

ADDRESS

ZIP

NAME
Kiahuna Golf Club, LLC

1001 Bishop St, Ste 1570, Hon HI

96813

Please provide real property billing address, if different from assessment address:

ADDRESS

ZIP

NAME
232 1537

232 1537

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee
Under Honolulu Ordinance No. 80-68, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.
Kiahuna Golf Club, LLCWaxing Manager
DAYTIME PHONE NO.: ()

808-524-1508

FORM P-64A

DAYTIME PHONE NO.: ()

BREAKDOWN OF SALES PRICE PER TAX MAP KEY

TMK (4) 2/8/014/007 - \$1,039,852.64
TMK (4) 2/8/014/008 - \$ 799,803.54
TMK (4) 2/8/014/028 - \$ 14,514.45
TMK (4) 2/8/014/031 - \$ 411,58.20
TMK (4) 2/8/014/036 - \$ 388,485.12
TMK (4) 2/8/015/077 - \$ 16,186.05

SALES PRICE \$2,300,000.00--

232 1538

DO NOT WRITE OR STAPLE IN THIS SPACE

Form P-64A
(REV. 1999)STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATECLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

		TAX MAP KEY		CPR NO.
Z	S	PLAT	PARCEL	
See Attached				
ISLAND Kauai				APT. NO. _____

NAMES OF PARTIES TO THE DOCUMENT (Please Type or Print)

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.

Sports Shikno (Kauai) Co., Ltd.

PURCHASER(S) / TRANSFeree(S) / GRANTEE(S), ETC.

KG Kauai Development, LLC

DATE OF TRANSACTION:

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1. Sale Price	1	500,000 00
EXCHANGE OF PROPERTIES:		
2a. Market value of all property(ies) exchanged	2a	
2b. Other consideration.....	2b	
2c. Total (Add lines 2a and 2b)	2c	
ASSIGNMENT OF LEASE:		
3a. Sale price of leasehold.....	3a	
3b. Value of any increase in lease rental capitalized at 6% (See Instructions)	3b	
3c. Total (Add lines 3a and 3b)	3c	
LEASE OR SUBLEASE:		
4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____ 1st period _____ yrs @ \$ _____/yr. 2nd period _____ yrs @ \$ _____/yr. 3rd period _____ yrs @ \$ _____/yr. 4th period _____ yrs @ \$ _____/yr. Total rent capitalized at 6%	4a	
4b. Sales price or premium for the lease.....	4b	
4c. Total (Add lines 4a and 4b)	4c	

TAX COMPUTATION AND BALANCE DUE:

5. Amount from line 1, 2c, 3c, or 4c.....	5	500,000 00
6. Less: personal property included in amount on line 5, if applicable	6	
7. Difference — Actual and full consideration (line 5 minus line 6)	7	500,000 00
8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$10).)	8	500 00
9a. Penalty. For late filing (See Instructions)	9a	
9b. Interest. For late payment (See Instructions)	9b	
10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b)	10	500 00

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here:

Please provide mailing address for assessment notice:
NAME

ADDRESS

ZIP

KG Kauai Development, LLC

1001 Bishop St, Ste 1570, Hon HI

96813

Please provide real property billing address, if different from assessment address:
NAME

ADDRESS

232 1540

ZIP

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee
Under Honolulu Ordinance No. 80-68, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.
KG Kauai Development, LLC

By Wayne Tanigawa, Its Manager

DAYTIME PHONE NO.: (808) 524-1508

FORM P-64A

DAYTIME PHONE NO.: () -

BREAKDOWN OF SALES PRICE PER TAX MAP KEY**TMK (4) 2/8/014/032 - \$237,526.89****TMK (4) 2/8/014/033 - \$100,513.37****TMK (4) 2/8/014/034 - \$ 53,212.96****TMK (4) 2/8/014/035 - \$108,746.78****SALES PRICE \$500,000.00****232 1541**

DO NOT WRITE OR STAPLE IN THIS SPACE

Form P-64A
(REV. 1999)STATE OF HAWAII—DEPARTMENT OF TAXATION
CONVEYANCE TAX CERTIFICATECLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR
DELIVER TO THE BUREAU OF CONVEYANCES
DO NOT STAPLE

TAX MAP KEY		PARCEL	CPR NO.
Z	S	PLAT	PARCEL
	See	Attached	
ISLAND	Oahu		APT. NO.

NAMES OF PARTIES TO THE DOCUMENT (Please Type or Print)

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.
Sports Shinko (Mililani) Co., Ltd.PURCHASER(S) / TRANSFeree(S) / GRANTEE(S), ETC.
Mililani Golf Club, LLC

DATE OF TRANSACTION:

Complete the applicable lines below. For more information, see Instructions on reverse side.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:

1

5,500,000 00

1. Sale Price

EXCHANGE OF PROPERTIES:

2a. Market value of all property(ies) exchanged

2a

2b. Other consideration

2b

2c. Total (Add lines 2a and 2b)

2c

ASSIGNMENT OF LEASE:

3a. Sale price of leasehold

3a

3b. Value of any increase in lease rental capitalized at 6% (See Instructions)

3b

3c. Total (Add lines 3a and 3b)

3c

LEASE OR SUBLEASE:

4a. Rent capitalized at 6% (See Instructions) Term _____ years beginning: _____

1st period _____ yrs @ \$ _____/yr. 2nd period _____ yrs @ \$ _____/yr.

3rd period _____ yrs @ \$ _____/yr. 4th period _____ yrs @ \$ _____/yr.

Total rent capitalized at 6%

4a

4b

4b. Sales price or premium for the lease

4c

4c. Total (Add lines 4a and 4b)

5,500,000 00

TAX COMPUTATION AND BALANCE DUE:

5. Amount from line 1, 2c, 3c, or 4c

5

5,500,000 00

6. Less: personal property included in amount on line 5, if applicable

6

200,000 00

7. Difference — Actual and full consideration (line 5 minus line 6)

7

5,300,000 00

8. Conveyance Tax (Multiply line 7 by .0010 and round to the nearest ten cents (\$.10))

8

5,300 00

9a. Penalty. For late filing (See Instructions)

9a

9b. Interest. For late payment (See Instructions)

9b

10. Total Balance Due (Line 8, and if applicable, add lines 9a and 9b)

10

5,300 00

If document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property here:

Please provide mailing address for assessment notice:

ADDRESS

ZIP

NAME

Mililani Golf club, LLC

1001 Bishop St, Ste 1570, Hon HI

96813

Please provide real property billing address, if different from assessment address:

ADDRESS

ZIP

NAME

232 1662

REPORTING OF REAL PROPERTY INTERESTS LOCATED ON THE ISLAND OF OAHU THAT ARE OWNED OR ACQUIRED BY FOREIGN PERSONS.

Check the applicable box(es) if the transferor and/or the transferee is a foreign person. Transferor Transferee

Under Honolulu Ordinance No. 80-68, a "foreign person" is any individual who is not a U.S. citizen or an alien resident. The term applies to business enterprises organized under foreign law, or their principal place of business is in a foreign country, or 25% or more of the equity or ownership interest is foreign.

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-38, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.

Mililani Golf Club, LLC

Warren T. Tanigawa, Jr.

Manager

By Wayne Tanigawa, Jr.

DAYTIME PHONE NO.: (808) 524-1508

DAYTIME PHONE NO.: () - - -

FORM P-64

BREAKDOWN OF SALES PRICE PER TAX MAP KEY

TMK (1) 9/5/001/035 - \$5,280,254.31
TMK (1) 9/5/001/076 - \$ 219,745.69

SALES PRICE \$5,500,000.00

232 1663